

FILED 26 OCT 16 1057AM CORP

UNITED STATES DISTRICT COURT
DISTRICT OF OREGON

DENNIS JAY Warren

SID # 7729469

DRCI - 3920 E. Ashwood Rd.

(Enter full name of plaintiff(s))

MADRAS, OR 97741

Plaintiff(s),

Civil Case No. 3-16-cv-2077-MC
(to be assigned by Clerk of the Court)

PRISONER CIVIL RIGHTS
COMPLAINT

v.

ODOC - Offender Management
And Rehabilitation Division.
and Heidi Steward (Assistant Director)
(Enter full name of ALL defendant(s))

Defendant(s).

I.

- A. Have you brought any other action or appeal in a court of the United States while a prisoner?

Yes

No

- B. If your answer to A is yes, how many? 1. Describe the lawsuit(s) in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline.)

1. Parties to the previous lawsuit:

Plaintiff(s): DENNIS JAY Warren

Defendant(s): Corizon Healthcare, Washington
County Jail and Colin - PA.

2. Court: Portland, Oregon
3. Docket Number: Unknown
4. Name of judge to whom case was assigned: Judge Jones
5. Disposition (Was the case dismissed? Was it appealed? Is it still pending?)
I have no idea - I went blind, was separated from all my court paperwork by the WA. Co. Sheriffs and sent to prison
6. Approximate date of filing: 2014
7. Approximate date of disposition: Unknown

II.

- A. Place of confinement: DEER Ridge Correctional Inst.
- B. Is there a prisoner grievance procedure in this institution?
Yes No
- C. Have you filed a grievance concerning the facts relating to this complaint?
Yes No

If your answer is no, explain why not:

- D. Is the grievance process completed?

Yes No

III. PARTIES

(In item A below, place your name in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.)

A. Name of plaintiff: DENNIS JAY Warren
Security Identification No.: 7729469
Address: DRCI - M - 3920 East Ashwood Rd.
Madras, Oregon 97741

(In item B, place the full name of each defendant, his/her official position, and his/her place of employment.

ODOC-Offender management
And Rehabilitation Division.

B. Defendant _____ is employed as Alcohol + Drug Program.
at 2575 Center St. NE - Salem, OR. 97301
Defendant Heidi Steward is employed as Assistant Director
at 2575 Center St. NE - Salem, OR. 97301

Defendant _____ is employed as _____
at _____

Defendant _____ is employed as _____
at _____

Defendant _____ is employed as _____
at _____

Additional defendants: _____

IV. STATEMENT OF CLAIM

Claim I

State what right under the Constitution, laws, or treaties of the United States has been violated.

I Am a Blind man that ODOC - DRCI - ordered me to participate in a Drug & Alcohol program that was not equipped for the Blind. My ADA Rights and Civil Right have been violated.

Supporting Facts: (State here as briefly as possible the facts of your case. Describe how each defendant is involved and when the conduct occurred. It is not necessary to give any legal arguments or cite any cases or statutes.)

I'm Blind - ODOC ordered me to DRCI Drug and Alcohol program. The Staff at that time (4-16) Said they could not handle a blind person - no large print, no Braille - very unlikely I would be able to participate in the program. I was told all of this by the Director of the program who no longer works for Doc - I signed out of the programs. Doc Took 18 good time credits from me, gave me a program fail and Took 90 Days Early release from me. I hadn't even started the program - Offender Management in Salem, OR and Heidi Steward, Salem OR are the last ones to address the second level grievance and therefore they are my defendants. They have twisted the truth to cover themselves and this prisons lack of proper ADA Standards.

Claim II
State what right under the Constitution, laws, or treaties of the United States has been violated.

ADA And my Civil Rights.

Supporting Facts: (*State here as briefly as possible the facts of your case. Describe how each defendant is involved and when the conduct occurred. It is not necessary to give any legal arguments or cite any cases or statutes.*)

Claim III

State what right under the Constitution, laws, or treaties of the United States has been violated.

Supporting Facts: (*State here as briefly as possible the facts of your case. Describe how each defendant is involved and when the conduct occurred. It is not necessary to give any legal arguments or cite any cases or statutes.*)

(If you have additional claims, describe them on another piece of paper, using the same outline.)

V. RELIEF

State briefly exactly relief you are seeking. Make no legal arguments. Cite no cases or statutes.

- ① No program failure -
- ② Restoration of loss of 18 good time
- ③ Restoration of 90 early
- ④ Trans. Leave -
50,000.00 - for my worry and being abused.

Signed this 20 day of October, 2016

Dennis J. Warren
#7729469
(Signature of Plaintiff(s))